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[www.illinoisattorneygeneral.gov](http://www.illinoisattorneygeneral.gov)

(Click on Protecting Consumers; then Franchise information)

## Franchise Complaint Form

### Information about YOU:

### Information about the Franchisor or Seller:

Your Name: Company Name: <hr/> Address : <hr/> City:                      State                      zipcode <hr/> Your Daytime Telephone Number: <hr/> Your E-mail address: How would you like us to contact you? <hr/> Who referred you to this office? <hr/>	Name: <hr/> Address: <hr/> City:                      State                      zipcode <hr/> Telephone (      ) <hr/> Names of contact persons representing seller: <hr/> Address <hr/> City                      State                      Zip Code <hr/> Telephone                      Email address: (      )
<b>Information about the Transaction</b>	
Did you receive a disclosure document telling you about the franchise? Yes No Date Received _____ If yes, please submit a copy of the receipt page along with this form and other relevant documents.	
Did you sign a contract, license or agreement? Yes No (If yes, please attach a signed and dated copy) Where were you when you signed the contract?                      Date signed: _____	
Did any negotiations or offers occur in Illinois? Yes No If yes, when _____ Describe:	
Franchise Fee Amount Paid: How was Franchise Fee Paid? Lump sum                      Installments                      Other _____ Total Investment:	
List any oral representations or promises made to you:	
Was franchise investment advertised? Yes No If yes, where and when?	

